## IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12<sup>TH</sup>, SUITE 1A DES MOINES, IA 50319

Fax: (515)281-4073 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

## FORM-GB

Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

Indexed		···
Audited	.,	
Checked	***************************************	
Compute	er	

## DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Iowa Medical and Classification Center	·	
Name of Department or Office 2700 Coral Ridge Ave. Co	Coralville, IA 52241	
	Citý, State, Zip Code	
Area Code & Telephone No.		
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFIC	DE;	
Jim McKinney		
Name Same		
Mailing Address (if different from above)	City, Stale, Zip (if different from above)	
Email Address	Area Code & Telephone Number (if different from above)	
OONOR OF GIFT OR BEQUEST:	<del></del>	
Jean Cadoret		
Name		
Unknown		
Mailing Address City, State, Zip Code	December 20, 2916 \$11.00	
	Date of Gift or Bequest Amount/Value*	
Area Code & Telephone Number	turbus is defined as "fair madick relus" of these as determined by	
	*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".	
Email Address (optional)		
Provide a description of the gift or bequest and purpose thereof:		
Cards and a book for the Chapel		
•		
Criteria to use this form:		
Described of any office has weed that to remain address and according to the	state or received by the Covernor on hehalf of the state	
Receipt of any gift or bequest that is received by any department of the	state of received by the Governor on behalf of the state.	
Statement of Affirmation:		

affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

2-20-17